**New Markets 2**

Logo

Description automatically generated

**Application Form**

Please complete all sections of the application form in full and return along with your quotes to [NewMarkets@growthplatform.org](mailto:NewMarkets@growthplatform.org) and a member of the Business Growth Team will be in touch.

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| 1. **Please tick if your business has received or is currently accessing any ERDF funding delivered by the following organisations:** | | | | | | | | **None** |  |
| Agent Marketing |  | Blackburne House |  | Downtown in Business |  | High Performance Consultancy |  | Liverpool Chamber of Commerce |  |
| Mersey Maritime |  | Sci Tech Daresbury |  | St Helens Chamber |  | The Women’s Organisation |  | University of Liverpool |  |

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| 1. **BUSINESS INFORMATION** | | | | | | |
| Business name |  | | | | | |
| Full address |  | | | | | |
| Postcode |  | | | | Company number |  |
| Main contact |  | | | | Position |  |
| Telephone number | Office |  | | | Mobile |  |
| Email address |  | | | | Website |  |
| Secondary Contact Name |  | | | | Secondary Contact Email |  |
| Is the business VAT registered | Choose an item. | | | | Vat Registration No. |  |
| Principal activity of business / sector | Choose an item. | | | | What year did the business begin trading? |  |
| Other |  | | |
| Does any other organisation own more than 25% of this business? | | | | | | Choose an item. |
| Is this business or any of its owners, shareholders or directors involved with any other business? | | | | | | Choose an item. |
| If yes, please provide details | | | | | | |
|  | | | | | | |
| **Staff headcount** is expressed in annual work units (AWU). Anyone who worked full-time within your business, or on its behalf, during the entire reference year counts as one unit. Part-time staff, seasonal workers and those who did not work the full year are treated as fractions of one unit. Apprentices or students engaged in vocational training with apprenticeship or vocational training contracts are **not** included in the headcount. Nor do you include maternity or parental leave. | | | | | | **Staff Headcount** |
|  |
| Turnover for the reference period (or projected turnover if business is less than 12 months old)? | | | £ | Net profit for the same period (or projected if business is less than 12 months old)? | | £ |
| Reference period for staff headcount, turnover and net profit (MM/YY – MM/YY)  (Previous or current accounting period where applicable) | | | | | |  |
| Annual R&D spend in the last complete financial year | | | £ | Number of product and process innovations in the last 3 financial years | |  |

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| 1. **FORECASTING – Projected growth over the next 3 years.** | | | |
|  | Turnover | Office use only - % increase | Profit |
| 2023 | £ | % | £ |
| 2024 | £ | % | £ |
| 2025 | £ | % | £ |

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| 1. **GROWTH PLAN** | | | | | |
| What support are you seeking to fund via the New Markets 2 Programme? | | | | | |
|  | | | | | |
| How will this project assist with growing your business?  Please give as much detail as possible as this will be used to assess your application for funding | | | | | |
|  | | | | | |
| Please indicate how many jobs you anticipate creating as a result of this support? | | | | | |
| 2022 |  | 2023 |  | 2024 |  |
| Please give details of any other anticipated benefits to your company as a result of this support?  Increase in productivity, efficiency savings etc | | | | | |
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| 1. **PROJECT DETAIL** | | | |
| Project Title | |  | |
| Project Cost (excluding VAT) | | £ | |
| Quotes (minimum of 3) | | | |
|  | Supplier | Value  (excl VAT) | Date obtained  (must be within the 10 days preceding the application) |
| 1 |  | £ | Click or tap to enter a date. |
| 2 |  | £ | Click or tap to enter a date. |
| 3 |  | £ | Click or tap to enter a date. |
| Which supplier have you chosen?  This must be the cheapest quote. | |  | |
| If all quotes were the same price, please explain why your chosen supplier offers the best value for money? | |  | |
| Anticipated start date  Please do not appoint a supplier until you have had Growth Platform confirmation that you have been awarded the funding | | Click or tap to enter a date. | |
| Anticipated date of claim to Growth Platform | | Choose an item. | |

WRAP works with governments, businesses and communities to deliver practical solutions to improve resource efficiency. For more information please see [www.wrap.org.uk](http://www.wrap.org.uk)

Please read the New Markets 2 Privacy statement on <https://growthplatform.org/wp-content/uploads/2021/03/New-Markets-2-Privacy-Notice-2019.pdf>

* I understand that the New Markets 2 project is part funded by the European Regional Development Fund (ERDF) and I confirm that if this project is successful our 65% contribution will not be sourced from any other EU funds.
* I acknowledge that it is a condition of the grant support that I provide the Growth Platform with output information and evidence upon request.
* I confirm I have received, read, understood and will comply the New Markets Terms & Conditions.
* The details above are true and accurate and I agree to the information being used as per the New Markets 2 Privacy Statement.

**Do not sign** – once checked the form will be sent to you via Signable, our electronic signature provider

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature** |  | **Name** |  |
|  |  |  |  |
| **Position in Company** |  | **Date** |  |
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1. **De Minimis Aid Declaration**

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| **OFFICE USE ONLY** | | |
| Project Name: | New Markets 2 | |
| Project Number: | 22R15P00658 | |
| Project Deliverer: | Growth Platform | |
| There are different state aid rules for the following sectors: agriculture, particularly primary food production: road transport; shipping; steel manufacture; telecommunications, land and property. Please confirm the recipient is eligible for the proposed support by initialling this box | |  |

You are being offered assistance under the European Commission’s De Minimis State Aid Regulations (Commission Regulation (EU) No. 1407/2013 OJ L 352/1 of 18 December 2013). The regulations allow a company to receive up to €200,000 (at applicable exchange rate) of De Minimis Aid over a rolling three-year period. The following information is a mandatory requirement to enable you to receive support from the New Markets 2 Programme.

To confirm that you are eligible to receive this assistance you must declare the full amount of De Minimis Aid/Subsidy you have already received over the last 3 fiscal years.

The following is not a comprehensive list of possible forms of aid; however, it should give an indication of the most common forms of aid which you may have been given over the past three years. Potentially any assistance from a public body might be aid. Should you have any doubts on this matter, please contact the body from which the assistance was received:

* Grants from Public bodies
* Loans from public bodies at favourable rates
* Loan guarantees from public bodies
* Differential tax benefits
* Grants from an investment trust (including charities) which may themselves have received the funds from a public body
* Grants from a part publicly funded Venture Capital firm
* Publicly administered funds, even if the funds were originally not public such as the national lottery
* Waiving or deferral of fees or interest normally due to a public body such as the waiving or deferral of rent or waiver of interest normally due on late payment of taxation or other costs to a public body
* Monopoly licences or guarantees of market share
* Advertising via a public channel such as a tourist board or state-owned television
* Consultancy advice provided wither free or at a reduced rate
* Training provided either free or at reduced rate
* Aid for investment in environmental projects
* Provision of a free or reduced rate feasibility study for research and development or other assistance with research and development
* Purchase of public land or property at a less than market rate
* Benefitting from the provision of infrastructure where your organisation was pre-identified as a beneficiary

These types of aid may have been provided under De Minimis (as De Minimis Aid) or under another State Aid regulation. If you are in any doubt whether aid received was De Minimis aid or about its value, check with the organisation, which provided it. If they are unable to say or there is any uncertainty, assume that it was De Minimis aid unless its value exceeded €200,000 in which case it cannot have been De Minimis. Any De Minimis state aid awarded to you under this project will have to be declared if you apply, or have applied, for any other De Minimis aid.

Please note, the UK-EU Trade and Cooperation Agreement avoids any EU specific terminology so SMEs receiving support from sources outside of ESIF projects from January 2021 will find that this support will be called a subsidy rather than state aid. This means that the SA1 needs to be re-worded to capture both de-minimis support and its new equivalent which are UK domestic subsidies from public funds that the SME may have received since 1st January 2021, which have not originated from ESIF programmes.

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| I declare that the amount of De-Minimis Aid / subsidy received by the company / organisation over the last three years is: | | | | |
| **Organisation Who Provided the Aid/Subsidy** | **Estimated Value**  **(£)** | **Date Aid/Subsidy Approved DD/MM/YY** | **Office use only** | |
| **Exchange rate** | **€** |
|  | £NIL |  |  |  |
|  | £NIL |  |  |  |
|  | £NIL |  |  |  |
|  | £NIL |  |  |  |

**N.B. If you have had no previous assistance please put NIL in the value box.**

I acknowledge that I am authorised to sign on behalf of the company named on the Application Form and understand the requirements of De Minimis (Commission Regulation (EU) No. 1407/2013 OJ L 352/1 of 18 December 2013). I acknowledge that if the company named on the Application Form fails to meet the eligibility requirements, the company may become liable to repay the full price that would otherwise be payable in respect of the services received.

The company named in this form is not a business “in difficulty” as defined at 2.1 of the Community Guidelines and State Aid for Rescuing and Restructuring Firms in Difficulty (2004/C 244/02) at the date of this declaration. The information set out on this form is accurate for the purposes of the De Minimis exemption.

**Do not sign** – **once checked the form will be sent to you via Signable, our electronic signature provider**

|  |  |  |
| --- | --- | --- |
| **Signature** |  | |
| **Date** |  | |
| **Company** |  |  |
| **Position in Company** |  |  |